## INTERN APPLICATION FORM OFFICE OF CONGRESSMAN PETER WELCH 128 Lakeside Ave, Burlington, Vermont 05401

(Please print or type) FULL NAME: \_\_\_\_\_ SS #: \_\_\_\_\_ PERMANENT HOME ADDRESS: HOME PHONE #: COLLEGE/UNIVERSITY: YEAR IN SCHOOL: \_\_\_\_\_ CUMULATIVE GPA: \_\_\_\_ MAJOR(S)/MINOR(S): ADDRESS AT SCHOOL: \_\_\_\_\_ **RESIDENCE PHONE #:** \_\_\_\_\_ CELL PHONE #: \_\_\_\_\_ E-MAIL ADDRESS: I CAN INTERVIEW IN VT \_\_\_\_\_ BY PHONE ONLY \_\_\_\_\_ PREFERRED DAYS/TIMES FOR INTERVIEW: Please indicate whether the materials listed below are enclosed or will be sent separately. Enclosed Sending cover letter: ( ) ( ) résumé: ( ) ( )

Your completed application form and additional required materials should be emailed to welchinterns@mail.house.gov

college transcript:

2 letters of recommendation:

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